



CENTRAL IRRIGATION TRUST

PO Box 34, BARMERA SA 5345
Phone: 8580 7100 Fax: 8588 2001
Email: office@cit.org.au

Application for a New Service

(This account is GST free)

FORM J
2023/24

NAME AND ADDRESS

I/We _____

Postal Address: _____

Email Address: _____ Mobile/Phone: _____

PROPERTY ADDRESS (do not use street address, please complete table below)

Section Numbers	Allotment Numbers	Title Volume	Folio	Plan Type & Number

SERVICE DETAILS

Date Service Required by: _____

Type of Service: **1** = Non-Drinking Water Service / **2** = Industrial / **3** = Irrigation / **4** = Parks & Ovals

Size of Service: _____ mm (25, 50, 80, 100, 150, 200 mm common sizing)

Application Type Code: **1** = First Service (*Non-Drinking Water – Form K required*) / **2** = Additional Service

Non-Drinking Water Service 1.000ml required: **1** = Purchase from CIT / **2** = Supplied by applicant (*Form B required*)

I/We agree to operate the service in accordance with Trust policy and acknowledge the Terms of Supply.

Print Name: _____ Signature: _____ Date: ___ / ___ / 20__

Print Name: _____ Signature: _____ Date: ___ / ___ / 20__

Print Name: _____ Signature: _____ Date: ___ / ___ / 20__

Office Use

Application: Approved / Declined

Outlet Number: _____ Type: Standard / Firm Quote / Actual Cost / No Charge

Receipt No: _____ Fee: _____ Date Paid: _____

Financial Services Manager: _____ Date: _____